



SPECIAL EVENT - PUBLIC PROPERTY USER APPLICATION & AGREEMENT



DO NOT USE FOR

* Contractor
vehicle permit

OR

* Single Day
Temporary Parking
Restriction
Request

DIRECTIONS

Step One:

- If this request involves closing a street
Contact Lafayette Police – Special Operations Division / 765-807-1293
- If this request involves renting the Big Four Depot - Community Room,
Riehle Plaza, or John T. Myers Pedestrian Bridge
Contact Facilities Department for availability / 765-807-1323

Step Two:

- Complete and submit this application to Lafayette Clerk's Office
City Hall, 2nd floor, 20 N 6th Street, Lafayette, IN / 765-807-1021

User Information

Date of Event: 14 MAY 2022 Time: From: 9 am/pm to: 11:30 am/pm

Name: TIM STREET ^{LACES FOR LISA SK} Organization: LACES FOR LISA, INC

Street Address: 624 BOZEMAN RD

City: LONDON State: IN Zip Code: 47955

Contact person(s): TIM STREET Phone Number(s): (765) 491-1320

Email: TSTREET@PURDUE.EDU

Event Description: LACES FOR LISA SK CHARITY RUN/WALK

Caterer: NONE

Caterer's Phone Number: _____

This event will utilize the following venues (check all that apply):

☐ Big 4 Depot - Community Room ☐ Riehle Plaza ☐ John T. Myers Bridge

☐ City Right-of-way ☒ City Street ☒ Sidewalk ☐ Other _____

This event will include the following elements (check all that apply):

Estimated Attendance: 200 ☐ Private Trash Hauler (must be removed by 8am following day)

☒ Street/Sidewalk/Right-of-way restriction or closure ☐ Food or Beverages

☐ Restroom Facilities (required for events 4+ hours) ☐ Tents/Canopies

☐ Alcohol (security is required) ☐ Security (required when serving alcohol)

Not sure if you need an A&E Permit? Go to:

☐ Amusement & Entertainment Permit # _____ <http://www.in.gov/dhs/2795.htm>

☐ Stage ☐ Fireworks ☐ Outdoor cooker/grill ☐ Other _____

Optional Equipment & Services:

- ☐ Traffic Control: barricades, **No Parking** signs, water barriers, **Road Closed** Signs \$25
- ☐ City Equipment: Trash totes, other \$25

Timetable (Minimum # of days. Advanced planning is encouraged; sequence remains the same)

	0	7 days	14 days	21 days		42 days	
	Pre-planning		Notices	Event Preparation			Event
Begin	1st week	2nd week	3rd week	4th week	5th week	6th week	
	First contact	Submit Application Pre-event Meeting	Contact Neighbors prior to Board of Works Hearing	Board of Works Public Hearing & Approval			Date of Event

Application submittal checklist

- ☒ Application
- ☒ Pre-event meeting (if required)
- ☐ Good Neighbor letter to neighboring properties (**send or deliver to neighbors 7 days prior to Board of Works hearing**)
- ☒ Letter of request to Board of Works (omit if only using Big Four Depot community room)
- ☐ Receipt – payment made to City of Lafayette
- Damage Deposit: \$ _____ (required only when renting Depot)
- Permit Fee: \$ 25 (fee waived when renting Depot)
- Rental Fee: \$ _____
- Equipment & Services: \$ _____ (optional)
- ☒ Certificate of Insurance
- ☐ Amusement & Entertainment Permit # _____
- Not sure if you need an A&E Permit? Want more information? Go to:
<http://www.in.gov/dhs/2795.htm> and see definition of A&E Permit in **Rule and Regulations** instructions found at the same link as the **Special Event Application**
- ☒ Traffic Control / Public Safety / Emergency Plan
- ☒ User Agreement
- ☐ Board of Public Works and Safety meeting (if required)

USER AGREEMENT:

INDEMNIFICATION AND RELEASE. In consideration of being permitted the use of the venue(s) indicated above on this document (the "Property"), which Property is owned by the City of Lafayette, User as indicated below, for User and User's legal representatives, successors, and assigns, hereby releases waives and discharges the City of Lafayette, its officers, departments and employees and of them (herein collectively, "City") from all liability to User and User's officers, members, legal representatives, successors, invitees and assigns (herein collectively "User") from any and all loss or damage, and any claim of damages resulting therefore, on account of injury to persons or property arising out of possession or use of the Property, whether caused by the negligence of City, or any of them, or otherwise, resulting during the time the User is entitled to occupy and use the Property. User shall exercise the privileges under this Agreement at User's own risk, and irrespective of any negligence of City, User shall indemnify and hold City harmless from any and all liability for all damages, costs, losses and expenses resulting from, arising out of, or in any way connected with User's use and possession of the Property, including attorney fees incurred by City in defending any action arising out of User's possession or use of the Property, whether caused by negligence of the City, or any of them, or otherwise. City shall not be liable to User for any reason whatever User's occupation or use of the Property shall be hindered or disturbed. User agrees that User has made inspection of the Property and is not relying upon any representations of City or any of them as to the condition of state of repair of the Property or to its suitability for any particular purpose. This release, waiver, and indemnification is intended to be as broad and inclusive as permitted by the laws of the State of Indiana, and if any portion thereof is held invalid, the balance shall, notwithstanding, continue in full legal force and effect.

I have read the above Indemnification and Release and the Policy and Rules governing the use of any public property, city street, sidewalk or public property within the city's right-of-way, the James F. Riehle Plaza, Big Four Community Room, and John T. Myers Main Street Pedestrian Bridge. I agree on my own behalf, and on behalf of the group or organization I am authorized to represent, to such Indemnification and Release and to follow such Rules and Regulations which are incorporated and made a part of this user agreement.

"Lafayette Board of Works"

By: _____

Date: _____

"User"

By: Timothy C. Street
Signature

Printed: TIMOTHY C. STREET

Date: 7 May 2022

March 8, 2022

Dear City of Lafayette,

This letter is to serve as a request for a special event permit for the 6th annual Laces For Lisa 5k run/walk on May 14, 2022 at 9:00 AM. This race is in honor and memory of Lisa Strueh who was killed on the way home from her nursing shift by an impaired driver on April 6, 2016. Funds raised go to support charities such as MADD, Lisa's Faith and Fitness trail at Immanuel UCC on 18th street, and Lisa's Acts of Caring at Community Hospitals. This race may temporarily impede traffic flow.

The 5k race will begin at 9:30 am and run until approximately 10:30 am with a volunteer following the last runner. We have purchased race insurance with a \$2,000,000 general aggregate, \$1,000,000 occurrence that includes the City of Lafayette as named insured and certificate holder. All participants also sign a liability waiver prior to beginning the race.

The race will begin and end at Immanuel United Church of Christ (1526 S 18th St), but in addition to the church grounds and the Lafayette School Corporation / Jefferson High School grounds, the runners will cross a city street and run on sidewalks for a portion of the course. The race course does not pass any residences or driveways.

In order to control the flow of traffic, the race will take place in only one lane. I have spoken with Sgt. Anderson Carpenter of the Lafayette City Police Department for preliminary approval of the route. Smokey Anderson with the Tippecanoe County Emergency Management Agency will be handling the security and traffic management. We will have law enforcement personnel and volunteers to ensure safety for runners, walkers, and cars traveling in the area

Along with this letter, I have included the application for permit, certificate of liability insurance, and map of the course. If you have any questions, please feel free to contact any of the following:

Denise Niblick 765-426-9546 denise47955@gmail.com

Tim Strueh 765-491-1370 tstrueh@purdue.edu

Thank you for your consideration,

Denise Niblick and Tim Strueh

LACES FOR LISH SK
14 MARCH 2022

Laces For Lisa 5k Run/Walk

14 March 2022

Traffic Control / Public Safety / Emergency Plan

Attached is a map showing the route of the 5k. Almost all of the run is on the property of Immanuel UCC and Lafayette School Corporation. The participants will cross 18th street and travel on the sidewalks on the east side of 18th for a couple of blocks. The route does not include any residential areas.

All of the safety and traffic control will be handled by Wm. Smokey Anderson, Director of the Tippecanoe County Emergency Management Agency. Safety warning signs and traffic cones will be used to warn the motorist and protect the runners. Traffic will only be stopped while runners cross the street.




CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/09/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER  Mike Kornafel State Farm 3135 Concord Rd Suite 1 Lafayette IN 47909		CONTACT NAME: Mike Kornafel PHONE (A/C, No, Ext): 765-474-1547 E-MAIL: mike@choosemike.com ADDRESS: FAX (A/C, No): 765-474-6357	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A: State Farm Fire and Casualty Company	
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
X	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:		94-EH-V208-8	04/01/2022	04/01/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPI/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/>					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
X	Business Personal Property		94-EH-V208-8	04/01/2022	04/01/2023	Amount \$1,000 Deductible \$500

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Inland Marine-Computer Property

Computer hardware/software limit: \$25,000

Loss of income and extra expense limit: \$25,000


Deductible: \$500

Annual Premium: \$325.00

Amount Paid: \$325.00

Amount Due: \$00.00

CERTIFICATE HOLDER**CANCELLATION**

City of Lafayette 20 N. 6th St Lafayette IN 47901	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 

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MISCELLANEOUS PAYMENT RECPT#: 3135278
City of Lafayette, IN
20 N 6th St
Lafayette IN 47901

DATE: 03/11/22 TIME: 15:01
CLERK: sscott DEPT:
CUSTOMER#: 999
MISC CUSTOMER
COMMENT:

CHARGES:
APG1 APPLICATION FEE 25.00
AMOUNT PAID: 25.00

PAID BY: LACES FOR LISA 5K
PAYMENT METH: CHECK
159

REFERENCE:

AMT TENDERED: 25.00
AMT APPLIED: 25.00
CHANGE: .00